

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re Application of
SUENG-IL NAM
Serial No. 09/773,417
Filed: February 1, 2001
Title: COMMUNICATIONS SYSTEM

Atty. Docket
GB 000019
Group Art Unit: 2631
Examiner: K. BURD

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JUL 30 2004

Commissioner for Patents
Washington, D.C. 20231

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Sir:
Applicants hereby petition for an extension of (1) ONE month to respond to the Office Action mailed on March 31, 2003; because of this extension the time period for response will expire on July 31, 2004. Filed herewith is a complete response to said Office Action.

Please charge Deposit Account No. 14-1270 in the amount of \$110.00, the fee for this extension; and charge any additional fees except for the Issue Fee, and credit any overpayment, to Deposit Account No. 14-1270.

Respectfully submitted,

By 
Aaron Waxler
Reg. 48,027
914-333-9608

24/2004 DSAVDY 00000002 141270 09773417

C:1251 110.00 DA

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09773417

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	9	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	9 minus 20=	0
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE

OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	355.00	OR BASIC FEE	710.00
X\$ 9=		OR X\$18=	
X40=		OR X80=	80
+135=		OR +270=	
TOTAL		OR TOTAL	790

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	** 20	=
Independent	Minus	*** 4	=	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Best Available Copy